

## FEC FORM 3L

REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS  
AND LOBBYIST/REGISTRANT PACs

1. NAME OF COMMITTEE (in full) <b>TYPE OR PRINT</b> Example: If typing, type over the lines. <span style="border:1px solid black; padding:2px;">12FE4M5</span>	
<b>OTERO FOR CONGRESS</b>	
ADDRESS (number and street) <span style="border:1px solid black; padding:2px;">1311 N. WESTSHORE BLVD., SUITE 101</span>	
<input type="checkbox"/> Check if different than previously reported. (ACC)	<span style="border:1px solid black; padding:2px;">TAMPA</span> <span style="border:1px solid black; padding:2px;">FL</span> <span style="border:1px solid black; padding:2px;">33607</span> CITY STATE ZIP CODE
2. <b>FEC IDENTIFICATION NUMBER</b> <span style="border:1px solid black; padding:2px;">C C00504688</span>	3. IS THIS REPORT <input checked="" type="checkbox"/> NEW (N) OR <input type="checkbox"/> AMENDED (A)
4. STATE DISTRICT For Candidates Only	
5. <b>TYPE OF REPORT</b> (Choose One) (a) Quarterly Reports: <input type="checkbox"/> April 15 Quarterly Report (Q1) <input type="checkbox"/> July 15 Quarterly Report (Q2) and/or Semi-annual Report <input type="checkbox"/> October 15 Quarterly Report (Q3) <input checked="" type="checkbox"/> January 31 Year-End Report (YE) and/or Semi-annual Report <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report	(b) Monthly Report Due On: <input type="checkbox"/> Feb 20 (M2) <input type="checkbox"/> May 20 (M5) <input type="checkbox"/> Aug 20 (M8) <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) <input type="checkbox"/> Mar 20 (M3) <input type="checkbox"/> Jun 20 (M6) <input type="checkbox"/> Sep 20 (M9) <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) <input type="checkbox"/> Apr 20 (M4) <input type="checkbox"/> Jul 20 (M7) and/or Semi-annual Report <input type="checkbox"/> Oct 20 (M10) <input type="checkbox"/> Jan 31 (YE) and/or Semi-annual Report (c) 12-Day PRE-Election Report for the: <input type="checkbox"/> Primary (12P) <input type="checkbox"/> General (12G) <input type="checkbox"/> Runoff (12R) <input type="checkbox"/> Special (12S) <input type="checkbox"/> Convention (12C) Election on <span style="border:1px solid black; padding:2px;">M M M</span> / <span style="border:1px solid black; padding:2px;">D D D</span> / <span style="border:1px solid black; padding:2px;">Y Y Y Y Y Y Y Y</span> in the State of <span style="border:1px solid black; padding:2px;"> </span> This report also covers the semi-annual period <input type="checkbox"/> See Line 6(b) (d) 30-Day POST-Election Report for the: <input type="checkbox"/> General (30G) <input type="checkbox"/> Runoff (30R) <input type="checkbox"/> Special (30S) Election on <span style="border:1px solid black; padding:2px;">M M M</span> / <span style="border:1px solid black; padding:2px;">D D D</span> / <span style="border:1px solid black; padding:2px;">Y Y Y Y Y Y Y Y</span> in the State of <span style="border:1px solid black; padding:2px;"> </span> This report also covers the semi-annual period <input type="checkbox"/> See Line 6(b)
6. Covered Period(s) This report covers <span style="border:1px solid black; padding:2px;">M M M</span> / <span style="border:1px solid black; padding:2px;">D D D</span> / <span style="border:1px solid black; padding:2px;">Y Y Y Y Y Y Y Y</span> through <span style="border:1px solid black; padding:2px;">M M M</span> / <span style="border:1px solid black; padding:2px;">D D D</span> / <span style="border:1px solid black; padding:2px;">Y Y Y Y Y Y Y Y</span> and/or <input type="checkbox"/> January 1 - June 30 <input checked="" type="checkbox"/> July 1 - December 31	(a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period
7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs <span style="border:1px solid black; padding:2px;">0.00</span>	(a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period <span style="border:1px solid black; padding:2px;">0.00</span>

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gaffney Sussman, Teresa, , ,

Signature of Treasurer

Gaffney Sussman, Teresa, , ,

[Electronically Filed] Date

01152017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3L  
02/2009